# Utilization of Modeling and Simulation in Lower Extremity Injury Analysis

May 5, 2000

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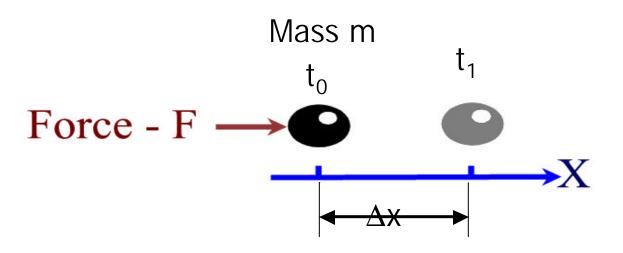


#### Outline

- Lump Mass Modeling 101
- Data Sources
- Upper Leg Injury Case Study
- Lower Leg Injury Case Study

#### **Lumped Mass Modeling 101**

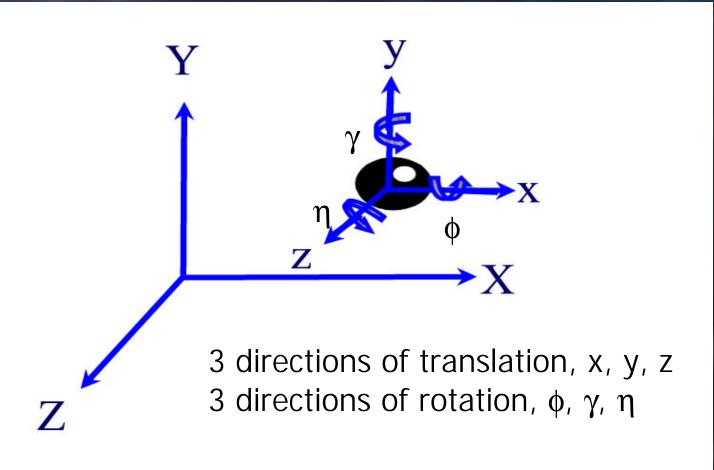




$$\Delta V = a \times \Delta t$$
  
 $\Delta X = \frac{1}{2} \Delta V \times \Delta t = \frac{1}{2} a \Delta t^2$   
 $a = F/m$ ;  $\Delta X = \frac{1}{2} F/m \Delta t^2$ 

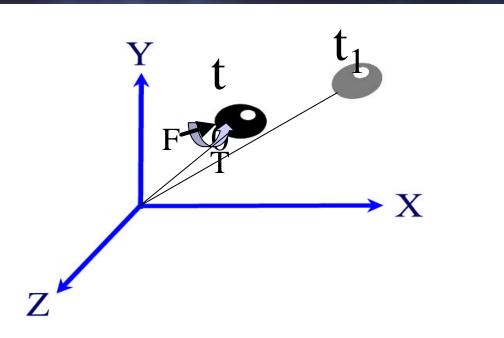


### Degrees of Motion for Models





# Lumped Mass Modeling Approach



Apply single degree relationships to:

X, Y, Z for Linear Displacements

φ, γ, η for Angular Displacements



### Forces Are Not Constant With Displacement

Modeling Requires Force Vs. Displacement Relationships

Force = K (x) Hook's Law

• Torque =  $k r(\phi)$ 



### Modeling Requires More Than One Mass

- Add masses connected by joints
- Add geometric compatibility relationships



#### Add Lumped Masses Connected by Joints

Applicable Laws and Principles:

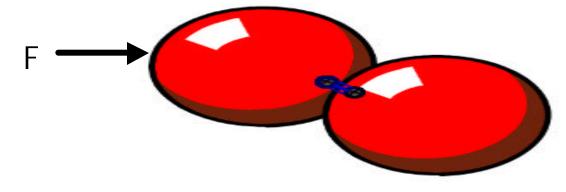
Newton's 1st Law; F = ma;  $T = I\alpha$ 

Force & Torque Equilibrium;  $\Sigma F = 0$ ;  $\Sigma T = 0$ 

Force vs Displacement Relationships

Geometric Compatibility; Joint Constraints

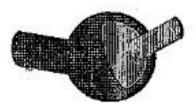
Two Segments Connected by a Joint



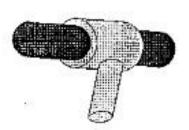


#### Typical Joints for Modeling

Ball & Socket or Free



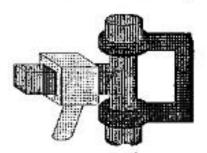
Slip With Rotation About Z Axis



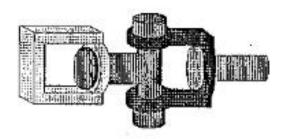
Pin (Hinge)



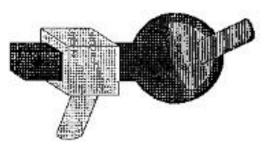
Slip With Rotation About Y Axis



Euler

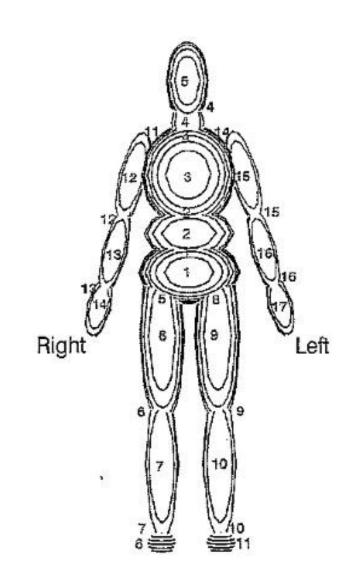


Slip With Complete Angular Freedom



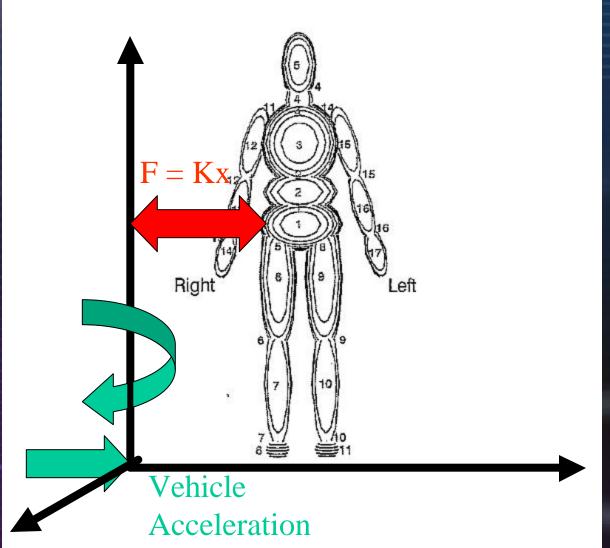


Hybrid III
Dummy
Model
17 Masses &
16 Joints





### Input - Vehicle Acceleration vs Time & Force Displacement Relationships



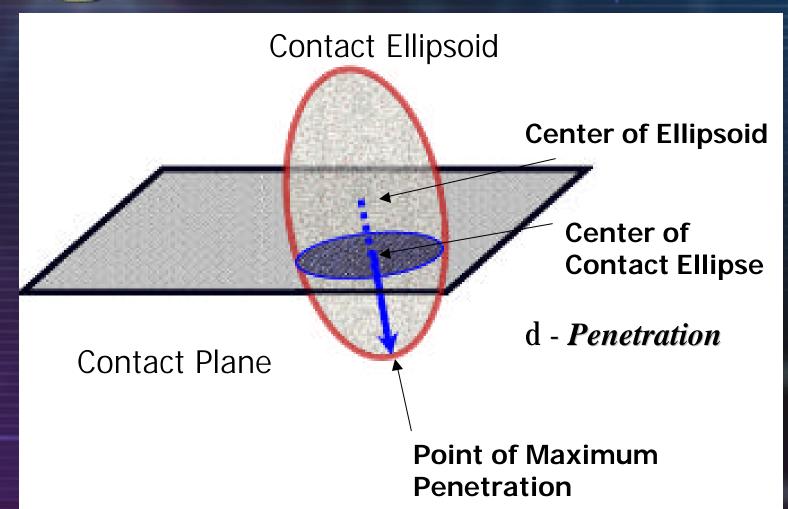


# Force Displacement Relationships

- Body segment surfaces represented by ellipsoids
- Vehicle surfaces represented by either:
  - Planes
  - Ellipsoids
  - Hyper-ellipsoids
- Contact forces represented by penetration of vehicle surfaces by body ellipsoids

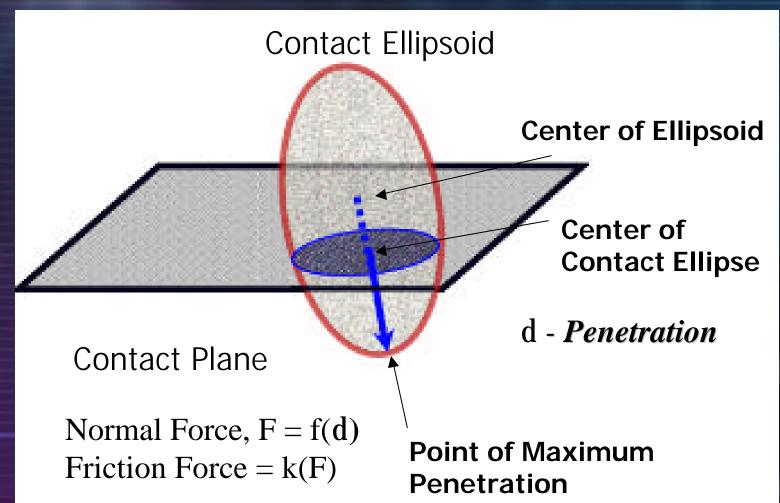


#### Definition of Penetration





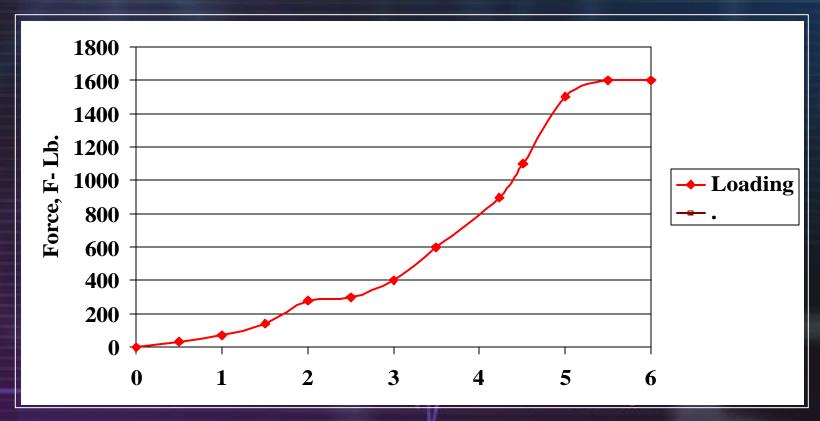
#### Definition of Penetration





# Typical Penetration vs. Force Relationship

Penetration,  $\delta$  - in.

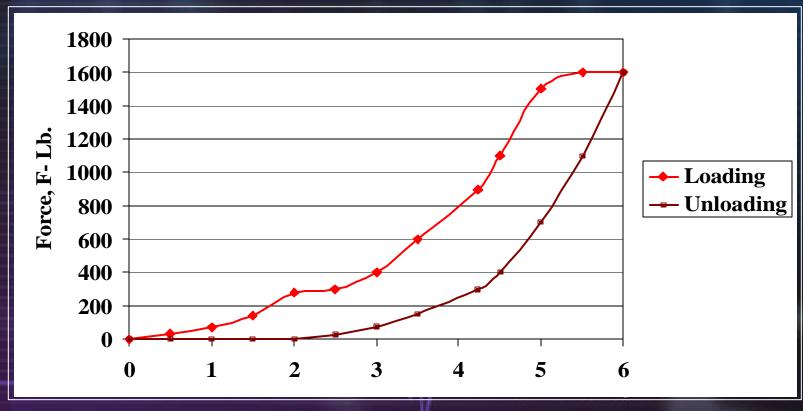


Deformation, in.



# Typical Penetration vs. Force Relationship

Penetration,  $\delta$  - in.



Deformation, in.

### Computer Reconstruction of Crashes

Alternative Models
Input Data
Sources of Data
Injury Criteria



- ATB lumped mass with string belts
- MADYMO lumped mass with FEM belts
   & contacts
- LSDYNA finite element with rigid skeleton



#### Comparison of Models

MODEL COMPUTER TIME

ATB PC 30 sec

MADYMO WORKSTATION 15 min

LSDYNA POWER 3-12 hrs CHALLANGE



### Approach to Reconstruction

- Use lumped mass models to gain insight into injury mechanisms
- Use cadaver tolerance data to interpret model predictions
- Use FEM models to study injury sensitivity of crash parameters to loads at locations where injury occurs



### Input Data Needs for Crash Reconstruction

- Occupant Model
- Vehicle Interior Geometry
- Force Deformation, Friction and Hysteresis of Belts, Air Bag, and Other Contacts
- Crash Pulse (and Intrusion Time -Displacement)
- Initial Position of Occupant



### Input Data Needs for Crash Reconstruction

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#### Occupant Model

- Validated models of hybrid III dummy available
- Scaling programs available for different size occupants
- No validated human model available
- Simulation is of a dummy not a human!



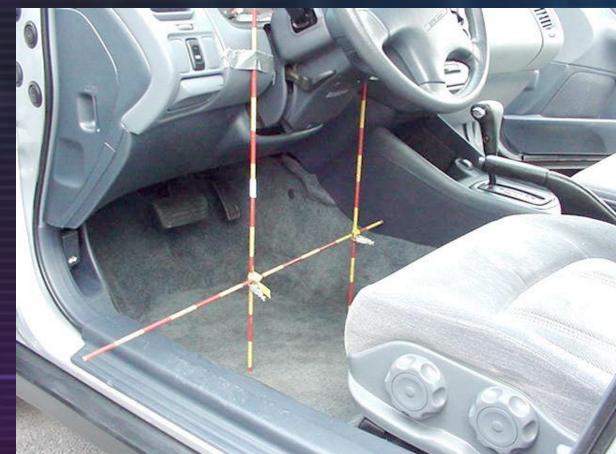
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- Initial Position of Occupant University of MIAMI



# Vehicle Interior Geometry

Obtained by Direct Measurement





### Input Data Needs for Crash Reconstruction

- Occupant Model
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- Initial Position of Occupant
   Initial Position of Occupant



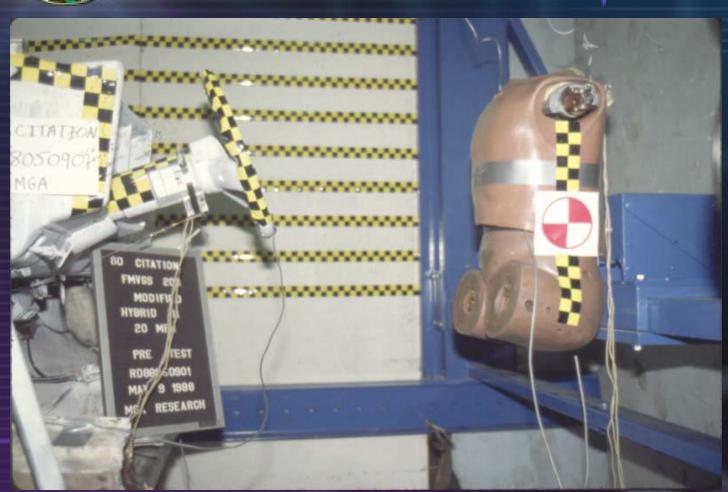
# Force Deformation Properties

 Library of properties available from NHTSA research testing

 NCAP and compliance tests of vehicles used to "tune" properties of knee restraints, air bags, and belts



# NHTSA Steering Column Dynamic Test





#### NHTSA Knee Restraint Static Test





### Input Data Needs for Crash Reconstruction

- Occupant Model
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- Crash Pulse (and Intrusion Time -Displacement)
- Initial Position of Occupantly of MIAMI



#### NCAP and Compliance Tests

- Crash pulse
- Belt slack
- Intrusion history
- Belt and air bag response
- Knee restraint response



### NCAP - 35 mph



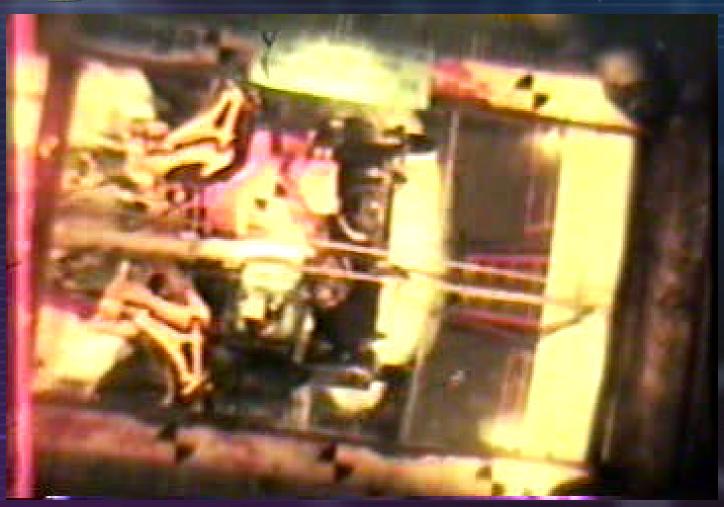


# Belt Spool Out NCAP





### NCAP Underside









# NCAP and Compliance Tests Other Applications

- Provide insights into dummy kinematics
- Provide insights into vehicle performance
- Compliance tests provide air bag response without belts



### Input Data Needs for Crash Reconstruction

- Occupant Model
- Vehicle Interior Geometry
- Force Deformation, Friction and Hysteresis of Belts, Air Bag, and Other Contacts
- Crash Pulse (and Intrusion Time -Displacement)
- Initial Position of Occupant University of MIAMI



#### **Initial Position**

- Driver Interviews
- Crash Investigation
  - •Including Louie the Leg
- Trial & Error Modeling





#### Input Data Needs for Crash Reconstruction - Summary

- Occupant model
- Vehicle interior geometry
- Force deformation, friction and hysteresis of belts, air bag, and other contacts
- Crash pulse (and intrusion time displacement)
- Initial position of occupant



### What Lumped Mass Modeling Can Do

- Insight into occupant (dummy) kinematics
- Insight into injury mechanisms
- Sensitivity of crash parameters to modify injury risk
- Direction and approximate magnitude of applied forces



### What FEM Models Can Do

- More accurately model human skeletal structure
- More accurately predict the joint forces that produce injury
- More accurately predict the stresses and strains that produce injury



#### Lower Limb Injury Criteria

- Upper Leg
- Lower Leg

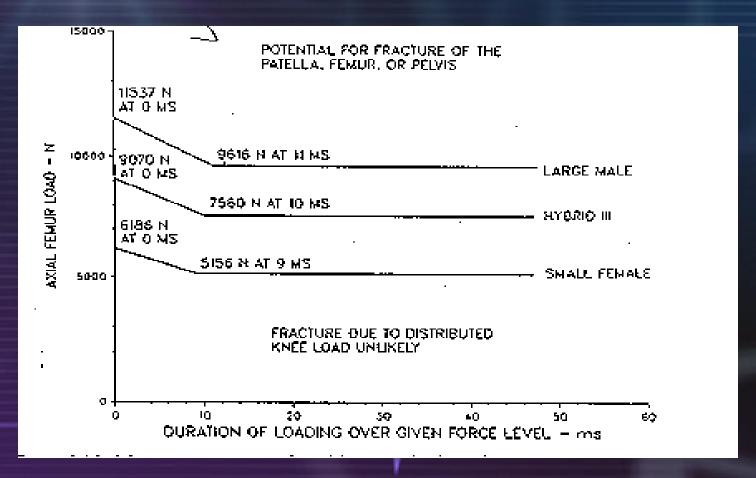


#### Femur Injury Allowable

Femur Force = 10000 N



# Injury Assessment Curves for Axial Compressive Femur Force Measured With Hybrid III-type Adult Dummies





## Case #1 Upper Leg Injury

Acetabulum Fracture-Dislocation

Why not a Femur Fracture?



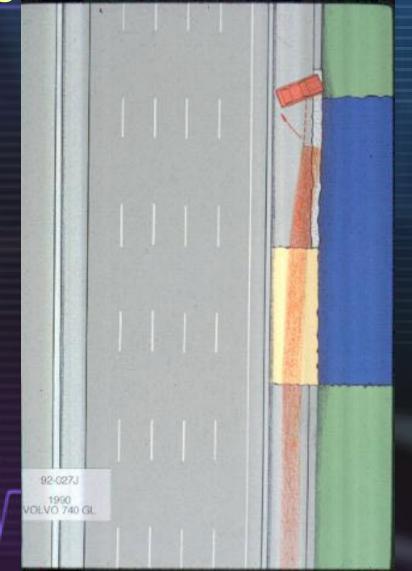
Vehicle to barrier crash

Frontal impact

Construction zone, driving on wrong side of barriers

Clear, dry, dark

Delta-V = 30 mph





### Crash Scene - Approach





### Crash Scene - Approach





### Crash Scene - Approach





#### New 1992 Volvo



ty of MIAMI



#### Case Vehicle - 1992 Volvo

Use Damage to
Calculate
Crash Severity

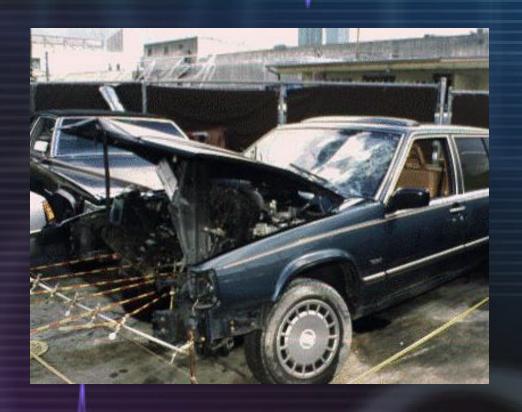
Delta-V = 30 MPH





#### Case Vehicle - 1992 Volvo

- 1990 Volvo 740
   GL
- PDOF 12 O'clock
- Delta V 36.5
   mph





#### Driver

- 29 y/o male
- Firefighter
- 73" tall, 208 lbs.
- Air bag deployed
- Unbelted
- High suspicion criteria



#### Injury Overview

- Abrasions, Right Forearm, Flank AIS 1
- Contusions, Right Forearm, Left Thigh –
   AIS 1
- Lacerations, Scalp, Right Forearm AIS 1
- Fracture, Right Acetabulum AIS 3
- Fractures, Left Ribs 5,6,7,8 AIS 3



#### Case Vehicle Interior



- Steering wheel deformity 4.5"
- Intrusions:
  - L Toe Pan 4"
  - Center Console 5"
  - L. floor 4"



#### Vehicle Interior-Air Bag Deployed





#### Vehicle Knee Panel



**Right Leg** 



Right Knee Contact with Kneel Riestrain of MIAMI



What was the mechanism of rib fractures on left and head of femur dislocation on the right?



### Examine Same Vehicle in Government Test



### NCAP Test of 1991 Volvo





#### **Examine Similar Crash**

Pole Crash with Ford LTD



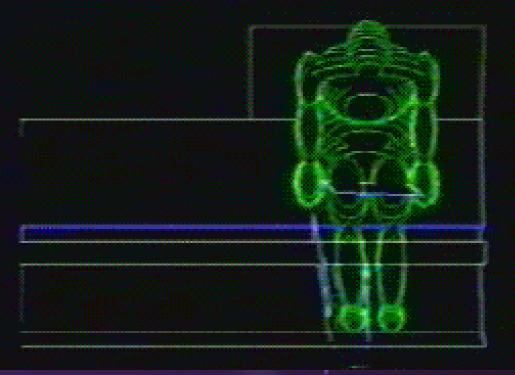
# Ford LTD Into a Pole at 30 MPH





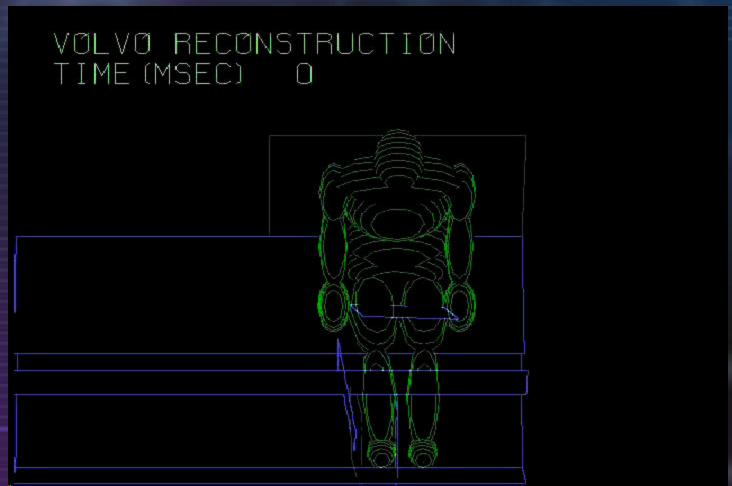
#### Reconstruction - No Intrusion

VOLVO - NO INTRUSION TIME IMSECI D



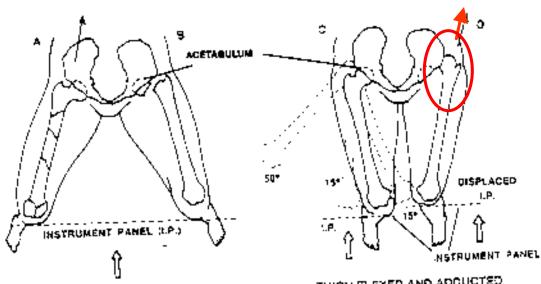


## Applied Lump Mass Modeling





#### Adducted Injury -Dislocation



THIGH FLEXED AND ABOUCTED

- FRACTURE OF FEMORAL SHAFT AND/OR CONDYLAR FRACTURES
- DISLOCATION OF PROXIMAL FEMUR ANDIGH SHEARED HEAD OF FEMUR

THIGH FLEXED AND ADDUCTED

- ACETABULAR PRACTURE OR
- POSTERIOR DISLOCATION OF FEMUR



#### Injury Mechanism

Direct loading of chest

 Axial loading with external rotation of right hip



#### Hospital Data

LOS – 17 days

Operative procedure: ORIF of right acetabulum

Hospital charges: \$47,003.08

Discharged home



# Conclusions and Summary

- Air bag mitigated life threatening chest injuries.
- Knee protection good
- Lower extremity exposure to injury still high
- Adducted right leg increased vulnerability to dislocation



### Lower Leg Injuries (Below the Knee)



#### Tibia Tolerance Mertz Criteria

Axial Compression (50th %) - 8000 N

- 5th % 5104 N
- 95th% 9840 N



# MECHANISMS OF FOOT/ANKLE INJURIES



## Ankle Injury Tolerance Malleolar Fracture

- "The Role of Axial Loading in Malleolar Fracture", Funk, Tourret, George, and Crandall, SAE 2000-01-0155
- Produced malleolar fracture from axial impacts of cadaver feet with 16 cm of intrusion
- Varied initial foot position
- Observed subsequent inversion or eversion
- Results ----

#### Cadaver Test Results

Initial Position

Direction of Bending

Location of

Force at Fracture

10° Inversion

Inversion

Fracture Lateral

5473N

30° Pf

**Eversion** 

Medial

7929N

**Neutral** 

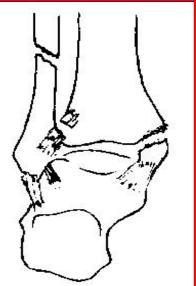
**Eversion** 

**Medial** 

7349N

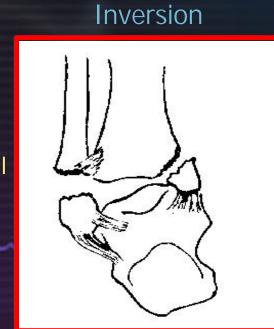
#### **Eversion**

Lateral



Medial

Lateral



Medial



#### Case Presentation

Lower Leg Injuries (Below the Knee)



# Case #2 Scene Diagram

Car-to-Car Crash

**Frontal Offset** 

Rural 2-Lane Road

Clear, Daylight

Passing Maneuver





#### Case Vehicle

Frontal Offset 1 O'clock 20° Oblique DeltaV- 32 mph 1993 Saturn SC2

POV - Plymouth Minivan (1992)





#### Case Vehicle

1" of Left Toe Pan Intrusion





#### Vehicle Interior

Steering Wheel Removed by Rescue Squad





#### Case Vehicle Driver

53 Year Old Female 5'2"; 205 lbs.

Did not meet trauma criteria



### Driver Injuries

Liver Lac - AIS 2

Rib Fx - AIS 2

Tear, Renal Artery AIS-3

Burn Right Arm - AIS-2

Open Fx R. Ankle - AIS-2

Open Fx. L Ankle - AIS-2



### Driver Injuries

Liver Lac - AIS 2

Rib Fx - AIS 2

Tear, Renal Artery AIS-3

Burn Right Arm - AIS-2

Open Fx R. Ankle - AIS-2

Open Fx. L Ankle - AIS-2



#### Chest Injuries

#### Liver Laceration - AIS 2 Rib Fracture - AIS 2

Apply Lumped Mass Model -

- 1 Examine Chest Loading by 2-Point Belt
- 2 Examine the Loading of Lower Limb Injuries

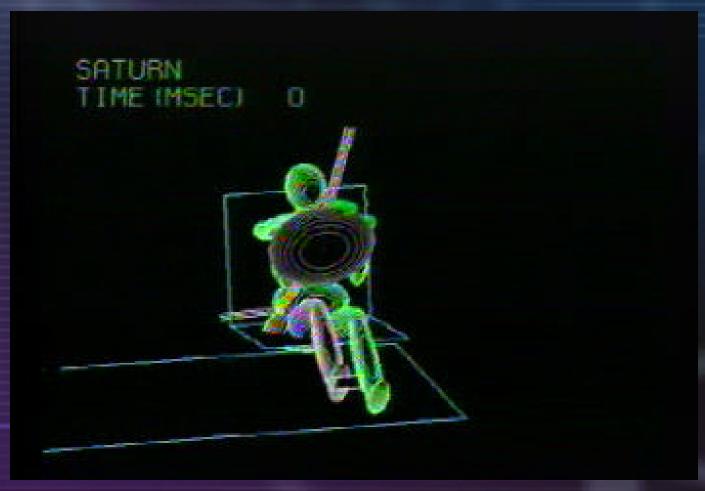


# Computer Reconstruction of Occupant Loading

- Input Vehicle Acceleration
- Model Occupant Using ATBModel
  - Lumped Mass Model (Like MADYMO)
- Model With Air Bag & Without Intrusion
- Add Intrusion
- Retain Air Bag Forces, but Remove it Graphically to Show Driver Kinematics

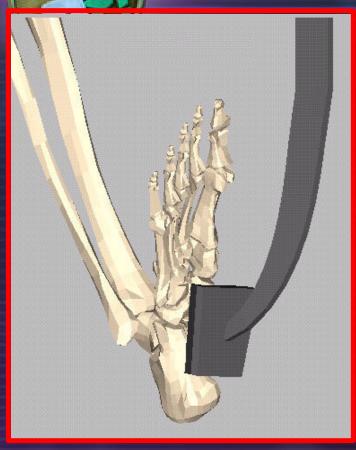


# Occupant Motion -Lower Limbs





#### Right Ankle Injuries



Right -Open Pilon Fracture
Dorsiflexion Mode



# Vehicle Brake Pedal Deformation

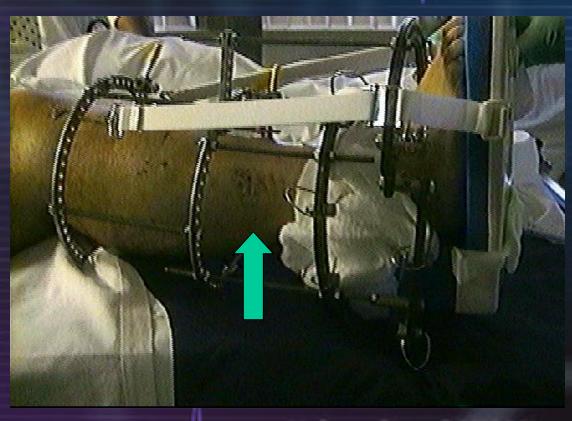
2" Lateral Shift

1" Toepan Intrusion





## Right Leg Abrasions







## Locating Lower Limbs

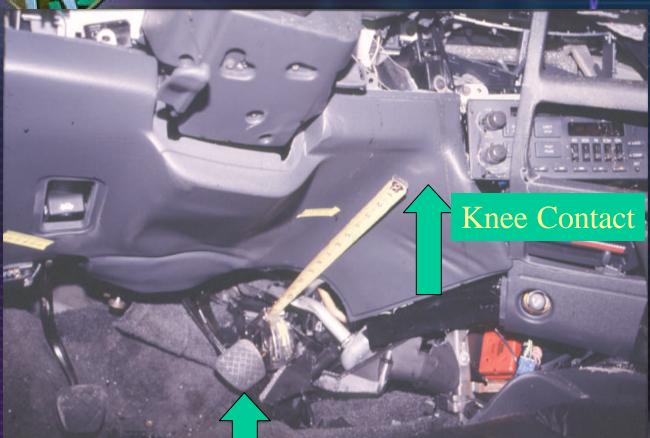




## Position of Right Foot



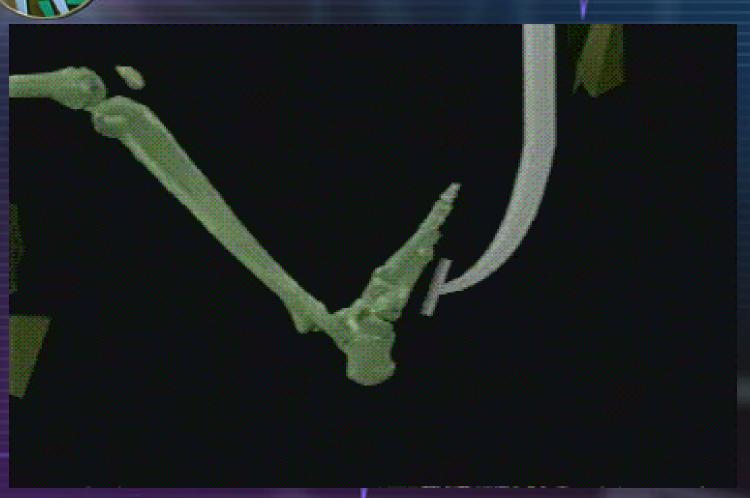




Evidence of Bracing



## Right Foot Simulation

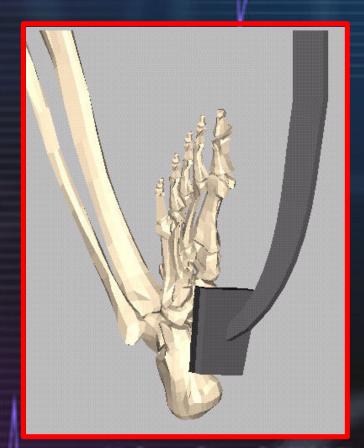




#### Case Simulation Results

Right Ankle Injury
Caused by Severe
Bracing and Brake Pedal
Loading

Right - 48° dorsiflexion Tibia force = 11.2 kN





#### Left Ankle Injury





Left - Open Fracture/dislocation Talo-Calcaneo-navicilar Joint Eversion Mode



# Eversion injury with minor toepan intrusion?



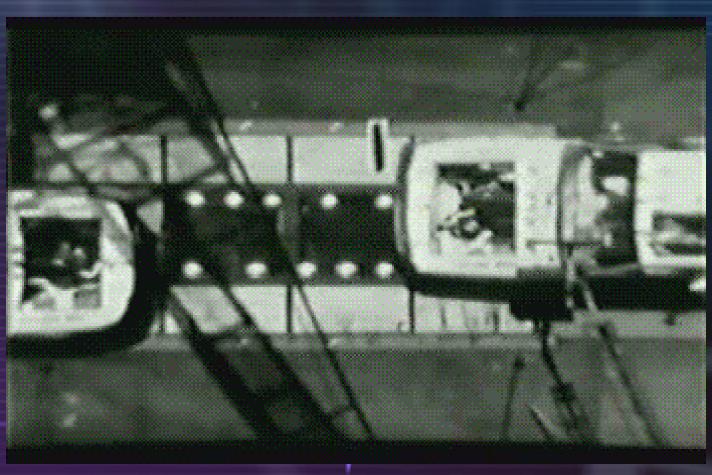
# Apply Crash Tests & Modeling to Answer the Question



## Offset Crash Tests from NHTSA & IIHS Files



### Force Vector in Car-to-Car Offset Crash



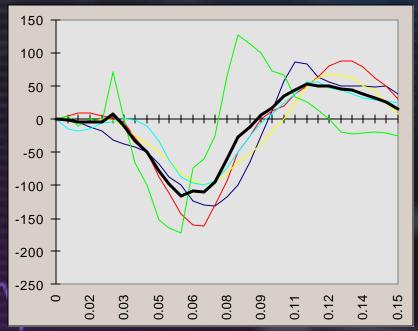


# Crash Pulse Determination Car-to-Car Offset Frontal Crash Accelerations

#### Longitudinal Pulse

#### 

#### **Lateral Pulse**





## Computer F-E Model of Human Lower Limbs

- FEM Model of Dummy
- Validation
- FEM Model of Human Limbs
- Validation
- Combine Models
- Apply to Injury Mechanisms





# Dummy/Leg FEM Model in Frontal Offset Crash





#### Case Simulation Results



Left ankle - Eversion

- High axial load
- Crash pulse with lateral component
- Uneven floor

Tibia force = 8.6 kN Left - 53° Eversion



## Summary of Injuries & Causes

- Right ankle dorseflexion from braking
- Left ankle eversion from axial load, lateral component in crash pulse, & uneven floor
- Liver shoulder belt loading
- Abdominal aorta bracing



### Principal Findings

- Shoulder belts w/o lap belts induce liver injuries
- Eversion injuries are possible without significant toepan intrusion
- Lateral acceleration acts to increase vulnerability of ankle joint to inversion/eversion



#### Conclusions

- Crash reconstruction improves understanding of injury mechanisms
- Application of crash tests and analysis aid in understanding injuries
- Eversion injuries can occur with no intrusion
  - High Axial Load
  - Lateral Acceleration
  - Uneven floor